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POWER OF ATTORNEY		Filing De		March 15, 2004				
			First Named Inventor		N. Stephen OBER			
and			SVSTEM A	ND METHO	D FOR GENERATING	DE-		
CORRESPONDEN	CE ADDRESS	Title	IDENTIFIE	D HEALTH	CARE DATA			
INDICATION FORM			Art Unit 2165					
			Examiner Name Samuel G. Rim		i. Rimell			
		Attorney	orney Docket No. 192367.0126					
I hereby revoke all prev	v alven in t	he shove-ider	rtified apolic	ation.				
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Applicant/Inventor.								
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Statement under 3	7 CFR 3.73(b) is encio	sed. (Form	PTO/SB/96)					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record								
Signature			D	ate	11/11/08			
	ew Kress		T	elephone	610-834-0800			
Title and Company President, Verispan, L.L.C.								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
X *Total of 2 forms are submitted.								

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner:	N. Stephen OBER et al.		
Application No./Patent No	o.: 10/801,086	Filed/Issue Date:	March 15, 2004
Entitled: SYSTEM A	ND METHOD FOR GENERAT	ING DE-IDENTIFIED HEALT	TH CARE DATA
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Additional	documents in the chain of title	are listed on a supplemental	sheet.
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(NOTE: A separa Assignment Divis See MPEP 302.0	ite copy (i.e., a true copy of the clon in accordance with 37 CFR I 8]	original assignment document(Part 3, to record the assignmen	s)) must be submitted to it in the records of the USPTO.
The undersigned (whos	e title is supplied below) is au	thorized to act on behalf of th	e assign ee .
	1~		11/08
/ >	Signature		Date
•	Andrew Kress		610-834-0800
	Printed or Typed Name		Telephone Number
	Dominidada		
	Title		